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**NOTICE OF FILING/CLAIM FEE(S) DUE**  
TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS  
FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: \_\_\_\_\_

**Total Fee Calculation**

Fee Code	Total # Claims	Number Extra	X	Fee	Fee =	Total
Sm./Lg.				Sm. Entity	Lg. Entity	
Basic Filing Fee	<u>201/101</u>			_____	_____	<u>790</u>
Total Claims >20	<u>203/103</u>	<u>25</u>	-20 = <u>5</u>	X	_____	<u>110</u>
Independent Claims >3	<u>202/102</u>	<u>3</u>	-3 = _____	X	_____	_____
Mult. Dep Claim Present	<u>204/104</u>			_____	_____	<u>270</u>
Surcharge	<u>205/105</u>			_____	_____	<u>130</u>
English Translation	<u>139</u>			_____	_____	_____
<b><u>TOTAL FEE CALCULATION</u></b>						<u>1300</u>

Fees due upon filing the application:

Total Filing Fees Due = \$ 1300

Less Filing Fees Submitted - \$ 0

BALANCE DUE = \$ 1300

W. Gordon  
Office of Initial Patent Examination